



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3723

|   |   |                                   |  |   |
|---|---|-----------------------------------|--|---|
| <b>SERIAL NUMBER</b><br>10/713,732  | <b>FILING OR 371(c)<br/>DATE</b><br>11/14/2003<br><b>RULE</b>   | <b>CLASS</b><br>424               | <b>GROUP ART UNIT</b><br>1648  | <b>ATTORNEY<br/>DOCKET NO.</b><br>6923-118                          |
| <b>APPLICANTS</b><br>Peter Palese, Leonia, NJ;<br>Adolfo Garcia-Sastre, New York, NY;<br>Thomas Muster, Vienna, AUSTRIA;  |   |                                   |  |   |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/332,288 06/11/1999 PAT 6,669,943 which claims benefit of 60/117,683 01/29/1999<br>and claims benefit of 60/108,832 11/18/1998<br>and claims benefit of 60/089,103 06/12/1998   |   |                                   |  |   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |  |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 03/04/2004</b>  |   |                                   |  |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and<br>Acknowledged <u>Examiner's Signature</u> <u>Initials</u> |   | <b>STATE OR<br/>COUNTRY</b><br>NJ | <b>SHEETS<br/>DRAWING</b><br>3   | <b>TOTAL<br/>CLAIMS</b><br>51<br><b>INDEPENDENT<br/>CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>20583   |   |                                   |  |   |
| <b>TITLE</b><br>ATTENUATED NEGATIVE STRAND VIRUSES WITH ALTERED INTERFERON ANTAGONIST ACTIVITY FOR<br>USE AS VACCINES AND PHARMACEUTICALS   |   |                                   |  |   |
| <b>FILING FEE<br/>RECEIVED</b><br>1258  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |